

Siddeeq Williams
Reg. No. 71042-050
FCI Fort Dix
P.O. Box 2000
Joint Base MDL, NJ 08640

February 5, 2021

Honorable Brian R. Martinotti
United States District Court
District of New Jersey
402 East State Street
Trenton, New Jersey 08608

RE: United States v. Siddeeq Williams
Case No. 3:17-CR-00484-BRM-1

Dear Judge:

I am writing you today to update you on my current situation as it changes daily. As stated in my previous letter, the Warden, David Ortiz, is out of here now. He's not retired as I previously stated but moved to the Regional Office.

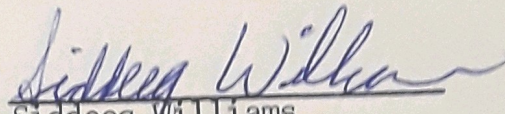
Today I received my compassionate release response (attached) from the Warden's office. The Response gets to me 89 days after I originally put it in and 7 days after the Warden responded to it and 14 days after the prison's first death. The warden gives a generic response that they are giving everyone who was declined who are high risk. "The medical department at Fort Dix advises that you may be a a higher risk for severe COVID-19; although you have already had COVID-19 infection. However, your medical conditions are stable, you are able to ambulate independently, and carry out self-care and daily living activities without assisantce." They are using this response because their Compassionate Release/Reduction in Sentence forms do not have a section for "Other Extraordinary or Compelling Circumstances" as also referenced in my original motion in the first thirteen pages.

Before COVID-19, the only medical assistance I've needed was for my knee and foot, results from an accident and sports. I have never had to be treated for anything else. Just last week, January 26th, I had to be prescribed more antibiotics from an infection that came to me over 3 months ago when I first contracted COVID-19. And yet they want to say I'm stable.

Before this I didn't suffer from Hyperlipidemia (low blood pressure) or Polycythemia Vera (rare blood cancer). I just found this out through my response and not from medical treating me for any of these. The medical staff and administration at FCI Fort Dix continues to put my life at risk. Currently Fort Dix is still at number one in the BOP with 210 inmate and 35 active staff cases and 1 death. Some of those positive new cases had received the vaccine already and with new variant strains on the rise, as medical department stated I am at higher risk for more sever COVID-19.

Please allow me to be released to home so I can get the proper medical attention I need and to be with my 5 children. Thank you very much.

Respectfully Submitted,


Siddeeq Williams

WILLIAMS, Siddeeq Q
Register No. 71042-050
Unit: 5812

INMATE REQUEST TO STAFF RESPONSE

This is in response to your request for consideration for a Compassionate Release/Reduction in Sentence (RIS) in accordance with Program Statement 5050.50. Specifically, you request a RIS/Compassionate Release as an inmate with a "Debilitated Medical Condition."

In accordance with Program Statement 5050.50, Compassionate Release/Reduction in Sentence, Procedures for Implementation, 18 U.S.C. 3582(c)(1)(A) and 4205 (g), an inmate may initiate a request for consideration only when there are particularly extraordinary or compelling circumstances which could not reasonably have been foreseen by the court at the time of sentencing. In order to meet the criteria as an inmate with a Debilitated Medical Condition, an inmate must be completely disabled, meaning the inmate cannot carry on any self-care and is totally confined to a bed or chair, or capable of only limited self-care and is confined to a bed or chair more than 50% of waking hours.

A review of your current medical status reveals you are a 42-year old inmate who has obesity, history of substance abuse, history of COVID-19 infection, chronic pain in your left knee and foot, hyperlipidemia, and polycythemia vera. The medical department at FCI Fort Dix advises that you may be at a higher risk for severe COVID-19; although you have already had COVID-19 infection. However, your medical conditions are stable, you are able to ambulate independently, and carry out self-care and daily living activities without assistance.

Accordingly, your request for compassionate release is denied. If you are dissatisfied with this response, you may appeal the decision through the Administrative Remedy process.



David E. Ortiz
Warden

1/29/21
Date

Before completing this sheet, please review Program Statement 5050.50, Compassionate Release/Reduction In Sentence, available in the law library.

COMPASSIONATE RELEASE/REDUCTION IN SENTENCE

NAME: Siddeeq Williams UNIT: 5812 REG#: 71042-050 DATE: 11/8/2020

Who is your Physician (circle): Patel Sceusa Sood Chinwalla UNKNOWN

Choose One Criteria: You can only apply under one criteria.

Extraordinary/Compelling Circumstances:

☒ Medical Circumstances

☐ Terminal Medical Condition- Terminal Diagnosis with 18 months or less life expectancy.

☒ Debilitated Medical Condition – Illness that has you partially (50%) or completely (100%) disabled.

☐ Elderly Inmates

☐ "New Law" Elderly Inmates – 70 years old or older, and served 30 years or more of sentence.

☐ Elderly with Medical Conditions – 65 years old or older and served at least 50% of sentence.

☐ Other Elderly Inmate- 65 years or older and served at least 75% of sentence or the greater of 10 years.

☐ Death or Incapacitation of the Family Member Caregiver of an inmate's dependent child- provide verifiable documentation the child is "suddenly" without a caretaker, the family member is in an incapacitated state and unable to care for the child.

☐ Incapacitation of a Spouse or Partner – provide verifiable medical documentation of incapacitated state.

To be completed by inmate:

Briefly describe your medical condition or non-medical circumstance:

History of Bronchitis, BMI of 35, 20 year history of smoking marijuana, and chronic knee pain, all of which elevate my risk for life-long complications or even death due to my infection to the COVID-19 virus.
If you have applied before, has anything changed in your medical condition since your last application (if so, describe):

Proposed Release Plan (Must have ALL of the following):

Name and contact information of who you will live with, and the last time you spoke to this person about your release plan:

Temieka Williams (ex-wife), Tamia Williams (Daughter), Sinya Williams (Daughter), and Talia Williams (Daughter) - spoke with ex-wife regarding this the week of Nov. 2nd.

Address of where you will be living: 283 Parker Street (2nd Floor), Newark, NJ 07104

Where will you receive medical treatment (if applicable): Local Hospital / Health Clinic

How will you pay for your medical treatment (if applicable): Medicare / Family Support / Insurance

Additional Comments:

I qualify for Compassionate Release under the "Other: Extraordinary and Compelling" reasons, pursuant to 18 U.S.C. § 3582, as amended by section 603(b) of the First Step Act of 2018.